

Dear Fellow Citizen,

Thank you for your willingness to serve on a state board or commission. Volunteerism and public service are a wonderful trademark of our country.

In order to receive the best possible consideration, we ask that you complete the application form below. It is valuable to include, or have sent, recommendation letters from those who know you personally in your community.

By legislative mandate or executive order, there may be specific requirements for certain appointments. For example, factors such as political party balance, geographical distribution, and professional or occupational disciplines may be relevant. For details on these requirements, please visit <a href="http://governor.wyo.gov">http://governor.wyo.gov</a> and click on "Boards and Commissions" or call (307) 777-5647 to discuss eligibility requirements and answer any questions you may have before you complete the application.

Please note that applications for gubernatorial appointments are generally kept on active file for a period of two years.

Again, your interest in serving is greatly appreciated.

Please return your application to: Lori Cielinski

Wyoming Relay

851 Werner Court, Suite 120

Casper, WY 82601

Fax: (307) 472-5601 ATTN: Lori Email: lori.cielinski@wyo.gov

## Please list the Board(s), Commission(s), and/or Council(s) in which you are interested (use additional sheets if necessary):

1) Telecommunications Relay Service (Wyoming Relay) Advisory Committee		
2)		
Full Name:	Email address:	
Physical Street Address:	Mailing address:	
City: State	: WY Zip Code:	
Professional License or Certification #:		
Phone: H: W:	Cell: Fax:	
Preferred Method of Contact: Ph/H □ Ph/W □	Ph/Cell □ Fax □ Email □ Mail □	
Gender: Male □ Female □	Date of birth:	
Occupation, profession, or position (please include employer's name):		
Please provide a brief description of your work experience, including duties performed:		
Education (please list degrees, schools, dates):		
By statute, certain boards and commissions require party affiliation balance.		
Political affiliation: (Republican, Democrat, Independent, Other)	Registered at least 6 months with this party? Yes $\Box$ No $\Box$	

Signature	Date
Name (please print):	
I certify that all information contained on this application knowledge and belief. I understand that any misreprofession of appointment.	·
Please feel free to provide us with any additional information appointment process. Use additional sheets if necessar welcome but certainly not a requirement.	
Do you have a unique perspective regarding issues facir applying?	ng the board(s) to which you are
Please list any circumstances that may restrict your avai	lability to serve, if appointed:
Please list current activities or volunteer work (i.e.: involved Services, Education, Recreation, Youth, Aging, Governme Agriculture, etc.):	
well as offices held:	ions to which you currently belong, as